

FORM PTO-1083
MAIL STOP: AF
COMMISSIONER FOR PATENTS
P.O. Box 1450
Alexandria, VA 22314-1450



Docket No.: 200.1079CON
Date: October 26, 2006

In re application of: Ronald M. BURCH, et al.
Serial No.: 10/033,055
Filed: December 27, 2001
For: ANALGESIC COMBINATION OF OXYCODONE AND CELECOXIB

Sir:

Transmitted herewith is a **Response** in the above-identified application.

Small entity status under 37 C.F.R. 1.9 and 1.27 has been previously established.
 Applicants assert small entity status under 37 C.F.R. 1.9 and 1.27.
 No fee for additional claims is required.
 A filing fee for additional claims calculated as shown below, is required:

(Col. 1) FOR :	(Col. 2)		SMALL ENTITY		LARGE ENTITY			
	REMAINING AFTER	HIGHEST PREVIOUSLY PAID FOR	PRESENT	RATE	FEES	OR	RATE	FEES
TOTAL CLAIMS	Minus	=	0	x \$ 9	\$		x \$ 18	\$
INDEP. CLAIMS	Minus	=	0	x \$ 42	\$		x \$ 84	\$
<input type="checkbox"/> FIRST PRESENTATION OF MULTIPLE DEP. CLAIM				+ \$180	\$		+ \$360	\$360.00
				TOTAL: \$		OR	TOTAL: \$360.00	

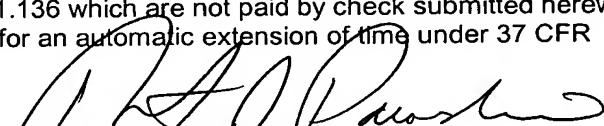
* If the entry in Co. 1 is less than the entry in Col. 2, write "0" in Col. 3.
** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, write "20" in this space.
*** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, write "3" in this space.

Also transmitted herewith are:
 Petition for three (3) month extension under 37 C.F.R. 1.136
 Other: Exhibit A (copy of U.S. Patent No. 4,464,376)

Check(s) in the amount of **\$0.00** is/are attached to cover:
 Filing fee for multiple dependent claim
 Petition for three (3) month extension under 37 C.F.R. 1.136
 Other:

The Commissioner is hereby authorized to charge payment of the following fees associated with this communication or credit any overpayment to Deposit Account No. 50-0552.

Any filing fee under 37 C.F.R. 1.16 for the presentation of additional claims which are not paid by check submitted herewith.
 Any patent application processing fees under 37 C.F.R. 1.17.
 Any petition fees for extension under 37 C.F.R. 1.136 which are not paid by check submitted herewith, and it is hereby requested that this be a petition for an automatic extension of time under 37 CFR 1.136.



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I hereby certify that this correspondence and/or documents referred to as attached therein and/or fee are being deposited with sufficient postage to the United States Postal Service as "first class mail" in an envelope addressed to "Mail Stop: AF; Commissioner for Patents, Alexandria, VA 22314-1450" on October 26, 2006

DAVIDSON, DAVIDSON & KAPPEL, LLC

BY: 
Akil Chevalier



IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Serial No.: 10/033,055
Applicant: Ronald M. Burch, et al.
Filed: December 27, 2001
Art Unit: 1639
Examiner: Sue Xu LIU
For: Analgesic Combination of Oxycodone and Celecoxib
Docket No.: 200.1079CON

Mail Stop: AF
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

October 26, 2006

Amendment

Sir:

In response to the Final Office Action of July 28, 2006, please reconsider the above-identified patent application based on the following remarks:

Amendments to the Specification begin on page 2 of this document.

Amendments to the Claims are reflected in the Listing of the Claims which begins on page 3 of this document.

Remarks/Arguments begin on page 6 of this document.

10/31/2006 AWONDAF1 00000049 500552 10033055

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